

## CITY OF ALBUQUERQUE ANIMAL WELFARE DEPARTMENT



## **QUESTIONNAIRE FORM FOR POTENTIAL DOG & CAT FOSTERS**

Thank you for your interest in becoming a foster agent for the Animal Welfare Department. Our organization relies on foster agents to provide a safe, caring home for our animals. Animals that need fostering are determined by management. Upon acceptance as a foster agent, your information will be added to our database to be called when we find an appropriate match for your home. A foster requirements form will be filled out at the time you pick up your foster animal(s).

|                     | Name:                                    |                                    |                          |                                       |  | L    | OB:    |          |
|---------------------|--|------------------------------------|--------------------------|---------------------------------------|--|------|--------|----------|
| Address:            | Street                                   |                                    | 10.4                     |                                       |  |      |        |          |
|                     | Street                                   | Ap                                 | t/Sp#                    | City                                  |  |      | State  | Zip Code |
| Home Phone:         | <i>P</i>                                 | Alt. Phone:                        |                          | · · · · · · · · · · · · · · · · · · · | Email:   |      |        |          |
| Are                 | you familiar with fo                     | ster programs and                  | how they                 | work?                                 | Yes [  | □ No | · 🗆    |          |
| Plea                | se check the followi                     | ng types of fosters                | you are w                | illing to                             | take:  |      |        |          |
|                     | Dogs 🗆 🔾                                 | Cats   Both                        |                          |                                       |  |      |        |          |
|                     | Unweaned litter                          | rs (no mother)                     |                          | Yes                                   |  | No 🗆 |        |          |
|                     | Nursing mother                           | rs with litters                    |                          | Yes                                   |  | No 🗆 |        |          |
| - T                 | Dogs/Cats with                           | medical issues                     | d. Anisua                | Yes                                   |  | No 🗆 |        |          |
|                     | Are you willing                          |                                    |                          | Yes                                   |  | No 🗀 |        |          |
|                     |  | pets with longhair                 | ?                        | Yes                                   |  | No 🗆 |        |          |
| •                   | •  | wned a pet before                  |                          | Yes                                   |  | No 🗆 |        |          |
|                     | ·  | •                                  |                          | Yes                                   |  | No 🗆 |        |          |
|                     | If yes, do you st                        | 20                                 |                          |                                       |  |      | *      |          |
| Y.C.                | 1 . 1 1 . 1 .                            |                                    |                          |                                       |  |      |        |          |
|                     | o, what happened to                      |                                    |                          | <del></del>                           |  |      |        |          |
|                     | rmation on your cu                       | rrent pets:                        |                          |                                       |  | g    |        |          |
|                     | 4.                                       |                                    | Gi<br>Lice               | ty                                    | Age  |      | Kept W | 'here    |
| Please provide info | rmation on your cu                       | rrent pets:                        | Gi                       | ty                                    | The State of the S |      |        | here     |
| Please provide info | rmation on your cu<br>Spayed<br>Neutered | Current Vaccinations               | Gi<br>Lice               | ty<br>ense                            | The State of the S |      |        | here     |
| Please provide info | Spayed Neutered Yes No                   | Current Vaccinations Yes No        | Gi<br>Lice<br>Yes        | ty<br>nse<br>No                       | The State of the S |      |        | here     |
| Please provide info | Spayed Neutered Yes No Yes No            | Current Vaccinations Yes No Yes No | Gi<br>Lice<br>Yes<br>Yes | ty<br>nse<br>No                       | The State of the S |      |        | here     |